4th: Lisa- 334-2282

Rev. 05/2006

LOBBYIST MONTHLY REPORT FORM

State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(6)
THIS SPACE FOR OFFICE USE ONLY

07 MAR -9 AN 9: 43

STATE OF INAHO

			ly in black ink)						J IMIL	. UI IU	ANU	
See instructions at bottom of page Lobbyist's name and permanent business address						Date prepared				Period covered		
Scott Turlington										month ending		
Tamarack Resort												
960 Broadway Ave						3/9/07				(Day)	(Yr.) I	
Boise Idaho										31	07	
Ttem	Totals	of all reportat	le expenditures made or	r incurred by Lo	bbyist o	r by	Lobbyist's Employer o	n behalf	of Lobby	ist's Emplo	yer.	
Category of Expenditure Reimburged Personal Living and Travel			*Total Amount for All Employers	Proportionate on Item 3, at botto	nounts co	s contributed by each employer (Ider page.)			ntify employers, under			
	o Not Have to b			Employer No	p. 1		Employer No. 2 B	nployer N	Vo. 3	Employer	No. 4	
	inment nd Refreshme	ent	5	s		\$_	s _			s		
Living.	Accommodat	ions				_					-	
Advert	ising					_						
Travel												
Teleph	оле					_						
Other I	Expenses or S	ervices				_						
		Total	s0.00	s	00,0	\$.	0.00		0.00	s	0.00	
•When			u are reporting for requir								on Page 1	
Item 2		feach expendi	ture of more than fifty d								In Comm	
	Date		Place		Amount		Names of Logislators,	PUDIC M	ig Executiv	VE OTTICISIS	in Group	
							İ					
				-								
				i								
	Continued on	attached page(s)		TR.	-	<u> </u>					
		INST	RUCTIONS		Rimployer		(s) Name(s) and Address(m)					
					No. 1	T	amarack Resort					
	6617 Idaho C		any lobbyist registered u	nger Section	_	91	60 Broadway Ave E	loise Id	aho			
		: Monthly re	aports due within ten (month.	10) days of the	No. 2	<u>}</u>						
TO BE FILED WITH: Ben Ysursa						No. 3						
Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 224-2282												

Item 4	Expend persons	or other tangible or intangible or Executive Official.											
	Date		Amount	Nan	ne of Legislator, Public or Executive Official Receiving or Benefiting								
Item 5	or House	Bill,		ion, the number of the Senate legislative activity in which	Code	LEGISLATIVE SUI							
	L					Subject Agriculture hosticulture		Subject Health service medicing dense					
Subject (from			solution or Other tve Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspapet, power, CATV, gas Other (please specify)					
Item identify any rule, ratemaking decision, procurement, contract bid or bid process, financial services or band lobbyist was supporting or opposing.						CERTIFICATION: I hereby certicorrect statement in accordance we have been accordance with the control of the co							